COMBINED DECLARATION AND POWER OF ATTORNEY

As the below named inventor, I hereby declare that:

FAX: 886-2-2369 7233

My residence, post office address and citizenship are as stated below next to my name and that I believe I am an original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

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	attached hereto. as filed on					
			and was amended on_		·	
specific I a applica I h applica foreign on which	cation, including t acknowledge the tion in accordanc nereby claim fore tion(s) for paten	he claims, as amended duty to disclose inforce with Title 37, Code or ign priority benefits und tor inventor's certificatent or inventor's certificated:	nd understand the content by any amendment referre mation which is material to f Federal Regulations, § 1. der Title 35, United States Content ate listed below and have ficate having a filing date be	d to above. the patents 56(a). code, § 119 also identifi	ability of this of any foreign ed below any	
	Number	Country	Date Filed(yyyy/mm/dd)	Yes	No	
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SEN	SEND CORRESPONDENCE TO:			DIRECT TELEPHONE CALLS TO: (Name and telephone number)		
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COMBINED DECLARATION AND POWER OF ATTORNEY CONTINUED

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patents issued thereon.

Signature:	Shih-Chemey Shei	Date:	01-29-2009
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